

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000005555

FILED
Jan 09, 2004
Secretary of State

Entity Name: LAKELAND SQUARE FOOTACTION, INC.

Current Principal Place of Business:

3800 US 98 N. HWY
STE 304
LAKELAND, FL 38809 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 141269
IRVING, FL 750141269 US

New Mailing Address:

FEI Number: 59-3167248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY
1201 HAYS ST, STE, 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VS () Delete
Name: LYNCH, MICHEAL
Address: 3835 GRANBURY DR DALLAS TX
City-St-Zip: DALLAS, TX 75287

Title: VPS () Delete
Name: WILSON, BETH M
Address: 122 PASADENA PLACE HAWTHORNE
City-St-Zip: MAHWAH, FL 07340

Title: P () Delete
Name: SHAWN, NEVILLE R
Address: 24 B OLD FARM RD
City-St-Zip: DARIEN, CT 06820

Title: V () Delete
Name: APPLBAUM, LEE D
Address: 279 SPRING VALLEY RD
City-St-Zip: PALISADES PARK, NJ 07650

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPS (X) Change () Addition
Name: LYNCH, MICHEAL
Address: 90 MCKEE
City-St-Zip: MAHWAH, NJ 07340

Title: VPS (X) Change () Addition
Name: WILSON, BETH M
Address: 3201 W. ROYAL LANE
City-St-Zip: IRVING, TX 75063

Title: PD (X) Change () Addition
Name: SHAWN, NEVILLE R
Address: 24 B OLD FARM RD
City-St-Zip: DARIEN, CT 06820

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS () Change (X) Addition
Name: GALANTE, ANDREA
Address: 3201 W. ROYAL LANE
City-St-Zip: IRVING, TX 75063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY BETH WILSON

VP

01/09/2004

Electronic Signature of Signing Officer or Director

Date